Fees Paid (\$)

\$510.00

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4. OTHER FEE(S)

Other: 3 month extension fee

PTC/SB/17 (12-04)
Approved for use through 07/31/2006. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

redmun lorino: AMO bilay a avainalb ti aselnu roltermohil o noticello: a ni boon Complete if Known Effect to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/009,369 Application Number FEE TRANSMI June 6, 2002 Filing Date For FY 2005 James H. Crowell First Named Inventor **Examiner Name** M. Safavi Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3673 (\$) 510.00 TOTAL AMOUNT OF PAYMENT CJL 301A2 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card None Other (please identify): Money Order Deposit Account Name: Kolisch Hartwell, P.C. Deposit Account Deposit Account Number 11-1540 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments WARNING: information on this form may become public. Credit card information should not be included on this form. Provide credit card Information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity** Small Entity **Small Entity** Fees Pald (\$) Fee (\$) Fee (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) 300 500 200 100 Utility 150 250 200 100 130 65 100 50 Design 200 300 150 160 80 Plant 100 Reissue 300 150 500 250 600 300 200 100 0 0 0 **Provisional** 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description 50 Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 25 100 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 180 Multiple dependent claims Multiple Dependent Claims Total Claims Extra Claims Fee Paid (\$) Fee (\$) Fee (\$) Fee Paid (\$) 20 or HP = HP = highest number of total claims paid for, if greater than 20 Extra Claims Fee (\$) Fee Paid (\$) Indep. Claims - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Extra Sheets Total Sheets (round up to a whole number) x 100 =

SUBMITTED BY	_		Λ.			
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Name (Print/Typ	e) Pier	re C.	Van Rysselbe	rghe		Date July 26, 2005

Non-English Specification, \$130 fee (no small entity discount)

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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